

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number. (Optional)  
406462000102



In re Application of  
George H. Lowell

Application Number

09/407,327

Filed

September 28, 1999

For

ORAL OR INTRANASAL VACCINES USING HYDROPHOBIC COMPLEXES  
HAVING PROTEOSOMES AND LIPOPOLYSACCHARIDES

Group Art Unit

1645

Examiner

J. Graser

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ \_\_\_\_\_
- ☒ Two months (37 CFR 1.17(a)(2)) \$ 400.00
- ☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_
- ☐ Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_
- ☐ Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952. I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor  
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
☒ attorney or agent of record.  
☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

April 25, 2002

Date

05/02/2002 SSITHIB1 00000002 031952 09407327

01 FC:116

400.00 CH

*Karen Babyak Dow*  
Signature

Karen B. Dow, Reg. No. 29,684

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.